APPLICATION DATA SHEET

Application Information

Application Number::

Not yet assigned

Filing Date::

December 2, 2003

Application Type::

Regular

Subject Matter::

Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form

(CFR)?::

Number of Copies of CFR::

Title::

SINGLE-VERSION DATA CACHE WITH MULTIPLE

CHECKPOINT SUPPORT

Attorney Docket Number::

42339-193270

Request for Early Publication?::

Request for Non-Publication?::

Suggested Drawing Figure::

Total Drawing Sheets::

None

Small Entity?::

No

Latin Name::

Variety Denomination Name::

Petition Included?::

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.::

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship:: USA

Country:: USA

Status:: Full Capacity

Given Name:: Haitham

Middle Name:: H.

Family Name:: AKKARY

Name Suffix::

City of Residence:: Portland

State or Province of Residence:: OR

Country of Residence:: USA

Street of Mailing Address:: 12572 NW Bayonne Lane

OR

97229

City of Mailing Address:: Portland

State or Province of Mailing

Address::

Country of Mailing Address:: USA

Postal or Zip Code of Mailing

Address::

Applicant Authority Type:: Inventor

Primary Citizenship:: Indian

Country:: USA

Status:: Full Capacity

Given Name:: Ravi

Middle Name::

Family Name:: RAJWAR

Name Suffix::

City of Residence:: Portland

State or Province of Residence:: OR

Country of Residence:: USA

Street of Mailing Address:: 1511 SW Park Ave., #612

Page 2

Initial 12/02/03

Country of Mailing Address::	USA
Postal or Zip Code of Mailing Address::	97201
Applicant Authority Type::	Inventor
Primary Citizenship::	Indian
Country::	USA
Status::	Full Capacity
Given Name::	Srikanth
Middle Name::	Т.
Family Name::	SRINIVASAN
Name Suffix::	
City of Residence::	Portland
State or Province of Residence::	OR
Country of Residence::	USA
Street of Mailing Address::	12572
City of Mailing Address::	NW Bayonne Lane
State or Province of Mailing Address::	Portland
Country of Mailing Address::	OR
Postal or Zip Code of Mailing Address::	97229
Applicant Authority Type::	Inventor
Primary Citizenship::	
Country::	
Status::	Full Capacity
Given Name::	
Middle Name::	
Family Name::	

Portland

OR

City of Mailing Address::

Address::

State or Province of Mailing

<i>\</i> ,				
Name Suffix::				
City of Residence::				
State or Province of	Residence::			
Country of Residence	e::			
Street of Mailing Add	dress::			
City of Mailing Addre	ess::			
State or Province of Address:: Country of Mailing A	•			
Postal or Zip Code o Address::	f Mailing			
Correspondence	Information		u.s.	
Correspondence Cus Number::	stomer 26694	4		
Phone Number::	202-3	202-344-8000		
Fax Number::		202-344-8300		
E-Mail Address::	Vena	ble.com		
Representative In	formation			
Representative Cust Number::	omer 26694	4		
Domestic Priority	Information			
Application::	Continuity Type::	Parent Application::	Parent Filing Date::	
	Continuation of			
	Continuation of			

Continuation of

Continuation of

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee Name:: Intel Corporation (a Delaware corporation)

Street of Mailing Address:: 2200 Mission College Boulevard

City of Mailing Address:: Santa Clara

State or Province of MailingCalifornia

Address::

Country of Mailing Address:: USA

Postal or Zip Code of Mailing 95052

Address::